DEMARK OFFICE

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Applicants Richard S. Ginn

Title Lung Assist Apparatus and Methods For Treating Spinal Discs

Docket No. 704117.4012

Customer No. 34313

704117-4012 J2G

Mail Stop Patent Application - DIVISIONAL Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

UTILITY PATENT APPLICATION TRANSMITTAL

1.	Type of Application This new application is for a(n) ☐ Original (non provisional) ☐ Design ☐ Plant									
2.	\boxtimes	Applicant claims small entity status. See 37 CFR 1.27								
3.	\boxtimes	Specification, including Description, Claims and Abstract (Total Page: 31)								
4.	\boxtimes	Formal Drawing(s) (35 USC 113) (Total sheets 6								
5.	Oath or a. b.	or Declaration Newly executed (original or copy) Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) Deletion of Inventors (Signed statement attached deleting inventors(s) named in the prior application.) See 37 CFR 1.63(d)(2) and 133 (b).								
6.		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)								
CERTIFICATE OF MAILING 37 CFR §1.10										
deposited with suffi Alexandri Express	d with the cient post a, VA 223	on the dated listed above, this paper (along with any paper referred to as being attached or enclosed) is being United States Postal Service in accordance with 37 C.F.R. § 1.10 as "Express Mail Post Office to Addressee," age in an envelope addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, 13-1450. .: EV 339737965 US								
Date of Deposit: February 5, 2004 Lynne Fulmer DOCSOC1:147210.1										

Docket		: 704117.4012						
7.	a. b.	Nucleotide and/or Amino Acid Sequence Submission (if application, all necessary) Computer Readable Form (CRF) Specification Sequence Listing on: CD-ROM or CD-R (2 copies); or Paper Statement verifying identity of above copies						
8.		An assignment of the invention to is attached. A separate "COVERSHEET FOR ASSIGNMENT (DOCUMENT) ACCOMPANYING NEW PATENT APPLICATION" or FORM PTO 1595 is also attached will follow.						
9.		37 CFR 3.73(b) Statement (when there is an assignee) (Power of Attorney by Assignee)						
10.		English Translation Document (if applicable)						
11.		Information Disclosure Statement/PTO 1449 (or PTO/SB/08a) Copies of citations						
12.	\boxtimes	Preliminary Amendment						
13.		Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
14.	. 🗆	Certified Copy of Priority Document(s) (if foreign priority is claims)						
15.		Non-publication Request under 35 USC 122 (b)(2)(B)(i) (Applicant must attach form PTO/SB/35 or its equivalent)						
16.		Other						
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet under 37 CFR 1.76:								
applica	tion is	Continuation Divisional Continuation-in-part (CIP) of co-cation Serial No. 09/947,785 filed on September 6, 2001. The priority of the prior expressly claimed, and the disclosure of this application is hereby incorporated by sentirety.						
	Prior application information: Examiner: Eduardo C. Robert Group Art Unit: 3732							
	For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior							

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.

Applicar Docket I		Richard Ginn 704117.4012						
18.	Fee Calculation A.	n: TOTAL AMOUNT (The Commissioner is overpayments to De Charge any addition Account No15-060 Payment Enclosed Check	s hereby autho posit Account al fee required	rized to cha No. <u>15-06</u> under 37 C	arge indicat 65	<u>.</u> nd 1.17 to Dep	•	
		BASIC FILING FEI	E:				\$770.00	
	Total Claims		18 -	20 =	0 x	\$18.00	\$.00	
	Independent (Claims	1 -	3 =	0 x	\$86.00	\$0.00	
	Multiple Dependent Claims \$290 (if applicable)						\$0.00	
	TOTAL OF A		\$770.00					
	Reduction by	\$385.00						
	Extension of Time (from above)							
		\$0.00						
		TOTAL FEES SUB	MITTED HERE	WITH			\$385.00	
20	c. 🗆	1.53.						
20.	Correspondence Custom	e Address ner Number. <u>343</u>	13					
			Re	spectfully s	submitted,			

Dated: February 5, 2004

James W. Geriak, Reg. No. 20,233

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